

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SP		04-11-01
O.I.P.E. CLASSIFIER		10	5-9-01
FORMALITY REVIEW	SI	1021	06/04/01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 ✗ Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted D Objected

Claim	Final	Original	Date
1	✓	✓	10/15/01
2	✓	✓	6/11/01
3	✓	✓	
4	✓	✓	
5	✓	✓	
6	✓	✓	
7	✓	✓	
8	✓	✓	
9	✓	✓	
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12	✓	✓	
13	✓	✓	
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47	✓	✓	
48	✓	✓	
49	✓	✓	
50	✓	✓	

Claim	Final	Original	Date
51	✓	✓	10/15/01
52	✓	✓	6/11/01
53	✓	✓	4/21/01
54	✓	✓	
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99	✓	✓	
100	✓	✓	

Claim	Final	Original	Date
101	✓	✓	4/21/01
102	✓	✓	
103	✓	✓	
104	✓	✓	
105	✓	✓	
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142	✓	✓	
143	✓	✓	
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145	✓	✓	
146	✓	✓	
147	✓	✓	
148	✓	✓	
149	✓	✓	
150	✓	✓	

If more than 150 claims or 10 actions
 staple additional sheet here

(LEFT INSIDE)

17/5/01
 06/04/01